



DEPARTMENT OF ENVIRONMENT & CONSERVATION
AIR POLLUTION CONTROL
401 CHURCH STREET, 1 & C ANNEX
NASHVILLE, TN 37243-1531

TN. DIV. OF
AIR POLLUTION CONTROL

AUG 10 2006

2006 JUL 26 AM 10:12

NOT TO BE USED FOR
TITLE V APPLICATIONS

PERMIT APPLICATION FOR STAGE I AND STAGE II VAPOR RECOVERY

FOR APC USE ONLY: COUNTY COMPANY POINT #

LOG/PERMIT #

APC 150

1. FACILITY NAME Lake City Shell OWNER'S NAME G&M Oil Company, Inc.
SITE ADDRESS (ST/RT) 705 North Main St MAILING ADDRESS 76 Old 25 E
CITY, STATE, ZIP CODE Lake City, TN 37769 CITY, STATE, ZIP CODE Barbourville, KY 40906
TELEPHONE NUMBER 865-426-6647 TELEPHONE NUMBER 606-546-3909

2. CLAIMING INDEPENDENT SMALL BUSINESS (I. S. B.) MARKETER OF GASOLINE AS STATED IN RULE 1200-3-18-.24(2)

YES ☐ NO ☒

IF YES, SUBMIT NOTARIZED CERTIFICATION STATING THAT BUSINESS SATISFIES THE I.S.B. DEFINITION CRITERIA
FOUND IN 1200-3-18-.24(2) AND PROVIDE THE FOLLOWING INFORMATION:

OWNER'S ANNUAL INCOME FROM REFINING OR MARKETING OF GASOLINE N/A

OWNER'S TOTAL ANNUAL INCOME N/A

3. NUMBER, GAS TYPE, CAPACITY, TYPE OF TANK - ABOVEGROUND (AG) UNDERGROUND (UG), INSTALLATION DATE

TANK #	GAS TYPE	SIZE	TANK TYPE	INST. DATE	TANK #	GAS TYPE	SIZE	TANK TYPE	INST. DATE
1	Regular	12,000 GAL	AG / (UG)	8/90	4		GAL	AG / UG	
2	Super	12,000 GAL	AG / (UG)	8/90	5		GAL	AG / UG	
3	Diesel	12,000 GAL	AG / (UG)	8/90	6		GAL	AG / UG	

4. TOTAL NO. GASOLINE NOZZLES N/A MAKE N/A MODEL N/A

5. GASOLINE DISPENSER MAKE N/A MODEL N/A

6. TYPE OF STAGE I SYSTEM (CARB EXECUTIVE ORDER) G-70-163-AA INSTALLATION DATE 4/17/06

7. TYPE OF STAGE II SYSTEM (CARB EXECUTIVE ORDER) N/A INSTALLATION DATE N/A

8. TYPE OF PRESSURE/VACUUM VENT VALVE (IF INSTALLED) MAKE OPW MODEL 523V-1150

9. MAXIMUM MONTHLY THROUGHPUT 151,000 GAL. AVERAGE YEARLY THROUGHPUT 1,8000,000 GAL.

10. MINIMUM SLOPE OF STAGE II VAPOR RETURN LINES FROM DISPENSERS TO UNDERGROUND TANKS N/A INCHES PER FOOT

11. TYPE OF PERMIT REQUESTED

CONSTRUCTION	STARTING DATE	COMPLETION DATE	LAST PERMIT NUMBER	EMISSION SOURCE REFERENCE NUMBER
()				
OPERATING	DATE CONSTRUCTION STARTED	DATE COMPLETED	LAST PERMIT NUMBER	EMISSION SOURCE REFERENCE NUMBER
(X)	4/17/06	4/17/06		001

12. SUPPLIER OF GASOLINE

COMPANY NAME	<u>G&M Oil Company</u>	CONTACT NAME	<u>Phil Scharr</u>
ADDRESS	<u>76 Old 25 E</u>	ADDRESS	<u>76 Old 25 E</u>
	<u>Barbourville, KY 40906</u>		<u>Barbourville, KY 40906</u>
PHONE NUMBER	<u>606-546-3909</u>	PHONE NUMBER	<u>606-546-3909</u>

13. SIGNATURE OF APPLICANT Phil Scharr DATE 7/24/06

14. SIGNER'S NAME (TYPE OR PRINT) Phil Scharr TITLE Safety and Env. Director PHONE NO. WITH AREA CODE 606-546-3909



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PERMIT APPLICATION

APC 20

PLEASE TYPE OR PRINT AND SUBMIT IN DUPLICATE FOR EACH EMISSION SOURCE. ATTACH APPROPRIATE SOURCE DESCRIPTION FORMS.			
1. ORGANIZATION'S LEGAL NAME G&M Oil Company, Inc.		/// FOR	APC COMPANY-POINT NO. 01-0232-01
2. MAILING ADDRESS (ST/RD/P.O. BOX) 76 Old 25 E		/// APC	APC LOG/PERMIT NO. 60211
CITY Barbourville	STATE KY	ZIP CODE 40906	PHONE WITH AREA CODE 606-546-3909
3. PRINCIPAL TECHNICAL CONTACT Phil Scharr			PHONE WITH AREA CODE 606-546-3909
4. SITE ADDRESS (ST/RD/HWY) 705 North Main St			COUNTY NAME Anderson
CITY OR DISTANCE TO NEAREST TOWN Lake City		ZIP CODE 37769	PHONE WITH AREA CODE 865-426-6647
5. EMISSION SOURCE NO. (NUMBER WHICH UNIQUELY IDENTIFIES THIS SOURCE) 001		PERMIT RENEWAL YES () NO (X)	
6. BRIEF DESCRIPTION OF EMISSION SOURCE			

Stage I Vapor Recovery for gasoline storage tanks-----Pollution Reduction Device Code 047

7. TYPE OF PERMIT REQUESTED				
CONSTRUCTION ()	STARTING DATE	COMPLETION DATE	LAST PERMIT NUMBER	EMISSION SOURCE REFERENCE NUMBER
OPERATING (X)	DATE CONSTRUCTION STARTED 4/17/06	DATE COMPLETED 4/17/06	LAST PERMIT NUMBER	EMISSION SOURCE REFERENCE NUMBER 001
LOCATION TRANSFER ()	TRANSFER DATE		LAST PERMIT NUMBER	EMISSION SOURCE REFERENCE NUMBER
ADDRESS OF LAST LOCATION				

8. DESCRIBE CHANGES THAT HAVE BEEN MADE TO THIS EQUIPMENT OR OPERATION SINCE THE LAST CONSTRUCTION OR OPERATING PERMIT APPLICATION.

Install 2 swivel vapor adapt. and 2 2-inch pressure vent vacuum for Stage 1 Vapor recovery.

9. SIGNATURE (APPLICATION MUST BE SIGNED BEFORE IT WILL BE PROCESSED) 		DATE 7/24/06
10. SIGNER'S NAME (TYPE OR PRINT) Phil Scharr	TITLE Safety Env. Director	PHONE WITH AREA CODE 606-546-3909